

ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY
MONITORING REPORT FOR DECENTRALIZED WASTEWATER TREATMENT FACILITIES VIA DRIP IRRIGATION
MONTHLY MONITORING REPORT

PERMITTEE NAME

Waterford Estates at Hissom Ranch POA

FACILITY NAME (IF DIFFERENT)

Waterford Estates at Hissom Ranch POA

PERMIT NO.

4815-WR-4

PERMITTEE ADDRESS

3567 W New Hope Rd
Rogers, AR 72756

FACILITY ADDRESS

2323 Bowen Blvd
Fayetteville AR 72703

AFIN NO.

72-00974

WASTEWATER EFFLUENT MONITORING PERIOD

MM/DD/YYYY

7/1/2017

MM/DD/YYYY

7/31/2017

TREATED WASTEWATER EFFLUENT SAMPLING

PARAMETER	Limit	Sample Measurement	UNITS	Monitoring	Reporting
Flow, Monthly total	REPORT	1.010244	MG	Total Flow per calendar month	Prior to the 15th of the following Month
Flow, daily maxlmun	REPORT	0.036893	MGD	Daily	
Carbonaceous Biochemical Oxygen Demand (CBOD5)	15	< 2	mg/l	Grab Sample once per month	
Total Suspended Solids (TSS)	15	< 2.5	mg/l		
Fecal Collform Bacterla (FCB)	2,000	< 4	colonies/100ml		
pH	6.0 - 9.0	7.4	s.u.		
Total Phosphorus (TP)	REPORT	7.2	mg/l		
Total Kjeldahl Nitrogen (TKN)	REPORT	25.9	mg/l	Grab sample once per quarter	
Ammonla Nitrogen (NH3-N)	REPORT	24	mg/l		
Nitrate Nitrogen (NO3-N) + Nitrite Nitrogen (NO2-N)	REPORT	18.7	mg/l		
Plant Available Nitrogen (PAN)	REPORT	43.3	mg/l		
Loading Rate	REPORT	See Attached	gpd/ft 2	Daily	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

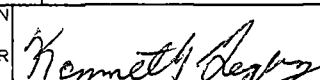
I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM WITH THE INFORMATION

SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR

OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND

COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION,

INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.



SIGNATURE OF PRINCIPAL

EXECUTIVE OFFICER OR

AUTHORIZED AGENT

TELEPHONE

(479) 530-5926

DATE

8/10/2017

MM/DD/YYYY

Kathy Bartlett

TYPED OR PRINTED

COMMENTS AND EXPLANATION OF VIOLATIONS (*Reference all attachments here*)

WATERFORD ESTATES LOADING RATES 36,893MAX Day Flow

Zone Identification	GPD/sq 2
Zone 1A	3,062
Zone 1B	2,915
Zone 2A	2,915
Zone 2B	2,767
Zone 3A	2,915
Zone 3B	2,915
Zone 4A	2,915
Zone 4B	2,915
Zone 5A	3,228
Zone 5B	3,379
Zone 6A	3,228
Zone 6B	3,689

Environmental Services Company, Inc.

Corporate Office
13715 West Markham
Little Rock, AR 72211
Tel. (501)221-2565 Fax (501)221-1341

Northwest Arkansas Branch
1107 Century Avenue
Springdale, AR 72762
Tel. (479)750-1170 Fax (479)750-1172

Control Number: 1707020193
Customer Name : GREENFIELD CAP DEV-WATERFORD
Customer/Permit No. : 1886 / 4815-WR-4
Report Date : 07/26/17

Sample Date : 07/19/17
Sample Time : 0917
Sample Type : GRAB WATERFORD
Sample From : DOSE TANL EFFLUENT

Collected By: AEU
Delivery By : AEU
Work Order :
Purchase Order :

Laboratory Analysis

Analysis							Quality Assurance	
Date	Time	By	Parameter	Result	Notes	Quantity	Method	Precision
								% RPD
07/20	0930	TSB	Ammonia Nitrogen	24.0 mg/L			SM 1997 4500-NH3 F	0.00
07/24	1330	TSB	Total Kjeldahl Nitrogen	25.90 mg/L			02/2014 HACH 10242	3.29
07/19	0919	AEU	pH	7.4 S.U.			SM 2000 4500-H+ B	0.00
07/24	1400	TSB	Phosphorous, Total (as P)	7.2 mg/L			EPA 365.3	1.20
07/25	1122	AEU	Solids, Total Suspended	< 2.5 mg/L			SM 1997 2540 D	0.00
07/19	1515	JCB	Coliform, Fecal	< 4 /100ml			SM 9222 D 1997	0.00
07/19	1400	TSB	BOD, Carbonaceous	< 2.0 mg/L			SM 2001 5210 B	4.86
07/25	0830	TSB	Nitrate + Nitrite	18.7 mg/L			SM 2000 4500-NO3 E	1.94
07/25	1000	TSB	Nitrogen, Plant Available	43.3 mg/L			SM 1997 4500-N	
07/19	0919	AEU	Sample Collection/Travel	1 each				
								% Recovery
								101.5 *
								109.0 *
								N/A *
								101.9 *
								N/A *
								N/A *
								100.6 *
								98.3 *

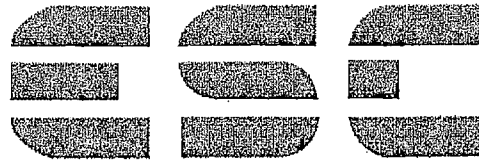
* QA data shown is from a different sample or standard on the same date.

All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

Signature

Richard Brown
Environmental Services Co., Inc.

Environmental Services Company, Inc.
Northwest Arkansas
1107 Century Street
Springdale, Arkansas 72762
website: www.esclabs.com



Corporate Office, Little Rock, Arkansas
501-221-2565

Carlsbad, New Mexico
575-887-1ESC

Phone: 479-750-1170 Fax: 479-750-1172

CHAIN OF CUSTODY

Client Information				Project Information						Requested Parameters										
Company Name: Waterford Estates				Permit/Project #:						pH(23)	F. Coliform(43)	CBOD(70), TSS(28), PAN(99.99)	NH3(15.A), Phos(25)	TKN(16.A), N+N(91)						
Address: 1695 Electric Avenue				Purchase Order #:																
Springdale AR 72764				Sampler Name(s): <i>Amber Underwood</i>																
Telephone: (479)751-8868				and Signature(s): <i>[Signature]</i>																
FAX: (479)757-7650																				
ESC Client Number: 1886																				
Sample Identification		Sample Collection				Sample Containers														
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#											
Dose Tank/Effluent	170702093	7/19/17	0917	Grab	Water	Teflon	150 ml	none	1	X										
Waterford Estates	I	I	I	Grab	Water	whirlpak	300 ml	none/ice	1		X									
				Grab	Water	Plastic	1 qt	none/ice	1			X								
				Grab	Water	Plastic	8 oz	H ₂ SO ₄ , pH <2	1				X	X						
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)				Date	Time	Custody Seals:										
<i>Amber Underwood</i>		7/19/17	1057							Used? <input checked="" type="checkbox"/> Intact? <input type="checkbox"/>										
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)				Date	Time	Turnaround: Regular <input checked="" type="checkbox"/> Special <input type="checkbox"/>										
										Were samples properly preserved: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>										
Relinquished By: (Signature and Printed Name)		Date	Time	Received for Lab By: (Signature and Printed Name)				Date	Time											
				<i>John Byrd</i>				7/19/17	1057											
Comments:				FLOW DATA		Field Test		Time	Analyst	Result	Result	Units								
				Analyst:		pH:		0919	AEW	7.4	7.4									
				Time:		Temp.:		I	I	27.0	27.1	°F								
				Reading:		DO:														
				Units:		Debris:														
Cool all samples to 6 degrees C.								Chlorinated? Yes No				This Document is Page 1 of 1								